## h22000120105

| (Requestor's Name)                      |
|---|
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| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
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## **COVER LETTER**

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|-----------------------------------|----------------|---|---|--|--|--|
| SUBJECT:                          |                | d & Cattle South LLC                            |   |  |  |  |
| Name of Limited Liability Company |                |   |   |  |  |  |
| The enclosed                      | l Articles of  | Amendment and fee(s) are sub                    | omitted for filing.   |  |  |  |
| Please return                     | all correspo   | ndence concerning this matter                   | to the following:   |  |  |  |
|                                   |                | Michael Dempsey                                 |   |  |  |  |
|                                   | Name of Person |   |   |  |  |  |
|                                   |                | ZenBusiness Inc.                                |   |  |  |  |
|                                   | Firm/Company   |   |   |  |  |  |
|                                   |                | 336 E College Ave, Ste 30                       | )।  |  |  |  |
|                                   |                |   | Address   |  |  |  |
|                                   |                | Tallahassee, FL 32301                           |   |  |  |  |
|                                   |                |   | City/State and Zip Code   |  |  |  |
|                                   |                | fulfillment@zenbusiness.co                      |   |  |  |  |
| For further in                    | iformation c   | oncerning this matter, please c                 | to be used for future annual report n                               | ouncation)   |  |  |
| Michael Den                       | npsey c/o Ze   | enBusiness Inc.                                 | 844 493-6249  |  |  |  |
| Name of Person                    |                | at () Area Code Days                            | time Telephone Number   |  |  |  |
| Enclosed is a                     | check for th   | ne following amount:                            |   |  |  |  |
| ■ \$25.00 F                       | iling Fee      | □ \$30.00 Filing Fee &<br>Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | □ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) |  |  |
|                                   | iling Addres   |   | Street Address:<br>Registration S                                   |  |  |  |
| Div                               | -              | orporations                                     | Division of C   | Division of Corporations The Centre of Tallahassee   |  |  |
|                                   | lahassee, I    |   |   | roe Street, Suite 810  |  |  |

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 JUN 17 AM 11: 34

| Mazur Land & Cattle South LLC   | SEUM COMPANY  |
|---|---|
| ( <u>Name of the Limited Liability Compa</u><br>(A Florida Limited l  | SECULIA SEE ATTASSEE, FE Liability Company)                       |
| The Articles of Organization for this Limited Liability Company Florida document number <u>L22000120105</u>         |   |
| This amendment is submitted to amend the following:   |   |
| A. If amending name, enter the new name of the limited liab   | ility company here:   |
| The new name must be distinguishable and contain the words "Limited Liabi   | lity Company," the designation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable:   | 14248 Action St   |
| (Principal office address MUST BE A STREET ADDRESS)   | Brooksville, FL 34601-5000  |
| Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)                               |   |
| B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: | address on our records, enter the name of the new registered      |
| Name of New Registered Agent:   |   |
| New Registered Office Address:  | Enter Florida street address                                      |
|   | Florida   |
| <del></del>   | City: Zin Code  |

## New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
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| <u>Sote:</u> If the date inserted in this   | the date of filing:  must be specific and cannot be prior to date is block does not meet the applicable st is Department of State's records. | of filing or more than 90 days after | ional)<br>er filing.) Pursuant to 605.020<br>is date will not be listed as |
|   | ctive date, but not an effective time, at  | 12:01 a.m. on the earlier of: (      | b) The 90th day after the  |
| record specifies a delayed effect is filed. |  |                                      |  |
| l is filed.                                 | 2022   |                                      |  |
| d is filed.                                 | ·  |                                      |  |

Filing Fee: \$25.00